



Archive Management Service, Inc.
 Of the Inland Empire
 (909) 656-2238 FAX (909) 656-2520

www.archivemanagement.com
 E-mail: ams@archivemanagement.com

FAX AND ORDER FORM

DATE: _____ TIME: _____ AM PM

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____ DEPARTMENT: _____

PHONE: _____ FAX: _____

ACCOUNT CONTACT: _____ PASSWORD: _____

SERVICE:					
PICK-UP	DELIVERY	DOCK ACCESS	UPS	FAX	MAIL
SERVICE PRIORITY:					
1 HOUR	4 HOUR	NEXT DAY	2 ND DAY	3 RD DAY	
FLAT BOXES:					
TYPE:	QTY:	25	100	600	OTHER

NOTES:

CONTAINER NUMBER	LOCATION	FILE NUMBER	DESCRIPTION

INVENTORY REPORTS NEEDED:

1. ALL CONTAINERS ON ACCOUNT 2. ALL FILES ON ACCOUNT 3. ALL CONTAINERS OUT OF AMS 4. ALL FILES OUT OF AMS

5. ALL CONTAINERS FOR DESTRUCTION DATE RANGE ____/____ 6. ALL FILES FOR DESTRUCTION DATE RANGE ____/____